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ORIGINAL



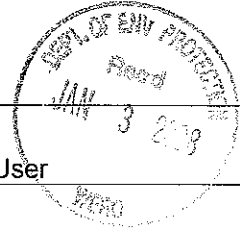
Enter your transmittal number

W200185

Transmittal Number

Your unique Transmittal Number can be accessed online: <http://mass.gov/dep/service/online/trasmfrm.shtml> or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes)

## Massachusetts Department of Environmental Protection Transmittal Form for Permit Application and Payment



1. Please type or print. A separate Transmittal Form must be completed for each permit application

### A. Permit Information

BWP IW 38

Permit for Industrial Sewer User

1. Permit Code: 7 or 8 character code from permit instructions

2. Name of Permit Category

Existing Sewer Discharge

3. Type of Project or Activity

2. Make your check payable to the Commonwealth of Massachusetts and mail it with a copy of this form to: DEP, P.O. Box 4062, Boston, MA 02211

### B. Applicant Information – Firm or Individual

Consolidated Edison Energy Massachusetts, Inc.

1. Name of Firm - Or, if party needing this approval is an individual enter name below:

2. Last Name of Individual  
15 Agawam Avenue

3. First Name of Individual

5. Street Address

West Springfield

MA

01089

(413) 730-4701

6. City/Town

7. State

8. Zip Code

9. Telephone #

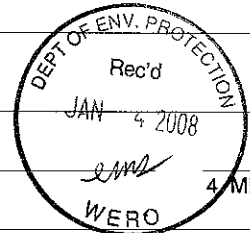
10. Ext #

Alan Douglass

douglassa@coneddev.com

11. Contact Person

12. e-mail address (optional)



3. Three copies of this form will be needed

Copy 1 - the original must accompany your permit application. Copy 2 must accompany your fee payment. Copy 3 should be retained for your records

4. Both fee-paying and exempt applicants must mail a copy of this transmittal form to:

### C. Facility, Site or Individual Requiring Approval

Consolidated Edison Energy Massachusetts, Inc.

1. Name of Facility Site Or Individual

15 Agawam Avenue

2. Street Address

West Springfield

3. City/Town

MA

01089

(413) 730-4701

0420117

4. State

5. Zip Code

6. Telephone #

7. Ext #

8. DEP Facility Number (if Known)

061548144

9. Federal ID Number (if Known)

10. BWSC Tracking # (if Known)

### D. Application Prepared by (if different from Section B)\*

1. Name of Firm Or Individual

2. Address

3. City/Town

4. State

5. Zip Code

6. Telephone #

7. Ext. #

8. Contact Person

9. LSP Number (BWSC Permits only)

\* Note:  
For BWSC Permits, enter the LSP

MassDEP  
P.O. Box 4062  
Boston, MA  
02211

### E. Permit - Project Coordination

1. Is this project subject to MEPA review? ☐ yes ☒ no  
If yes, enter the project's EOE file number - assigned when an Environmental Notification Form is submitted to the MEPA unit:

EOEA File Number

### F. Amount Due

#### Special Provisions:

1. ☐ Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less)  
There are no fee exemptions for BWSC permits, regardless of applicant status  
2. ☐ Hardship Request - payment extensions according to 310 CMR 4.04(3)(c)  
3. ☐ Alternative Schedule Project (according to 310 CMR 4.05 and 4.10)  
4. ☐ Homeowner (according to 310 CMR 4.02)

Check Number

Dollar Amount

Date

DEP Use Only

Permit No:

Rec'd Date

Reviewer:

108473

\$1605.00

12/11/07